

Docket No.:____

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

IMAGE READING DEVICE, IMAGE READING METHOD, AND LIGHT SOURCE FOR

THE SAME						
described and cla	imed in the specific	cation:			=-	
Check one						
*a.	attached heret	0.				
b.	filed on	as Application	n Serial No	and		
	amended on	·				
	(if applicable)	raviawad and un	dorstand the cents	ents of the abo	ve-identified application, in	chiding the
	ed by any amendm			ints of the abo	ve-identified application, in	icidumig the
I ackn	owledge the duty	to disclose to the	Office all informa	ation known to	me to be material to pate	ntability as
	7, Code of Federal	-				
Under provisional applic	Title 35 U.S. Code cation(s) filed with	e § 119, the prior in one year prior to	ity benefits of the this application as	following fore re hereby clain	ign application(s) and/or U led:	nited States
Japanese	Patent Applica	tion No. 10-342	188, filed on De	cember 1, 19	98	
the United States	ollowing applicatio of America either iority application(s	(a) more than one	year prior to this	application, or	ntion were filed in countrie (b) before the filing date of	s foreign to f the above-
the Customer Nu Office connected		ow to prosecute the ct that all correspo	is application and	to transact all	an, Lewis & Bockius LLP business in the Patent and omer Number.	
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herein of my own further that these by fine or impris	n knowledge are t statements were m	rue and that all sta lade with the know under Section 100	atements made on vledge that willful D1 of Title 18 of	information a false statement the United St	eclaration, and that all states and belief are believed to be to and the like so made are ates. Code and that such we have the code and the	e true; and punishable
Typewritten Full Name of Sole or First inventor:		Hirokazu			Ichikawa	
		Given Name	Middle	Initial	Family Name	
**Inventor's Signature:		Zhrokazi	ı		Ochikawa	
**Date of Signature:		/	0 /	25	1999	
		Mo	onth	Day	Year	
Residence:	Ebina-shi		Kanagawa		Japan	
a	City	Tomor	State of Prov	ince	Country	
Citizenship:		Japan	Co. 141 227	1 II.		
Post Office Addre	ess:	c/o Fuji Xerox Co., Ltd., 2274, Hongo, Ebina-shi, Kanagawa, Japan				
address, including country)		Edina-sni, Kar	iagawa, Japan			

- *This form may be executed only when attached to the specification (including claims) at the end thereof if Box a. is checked.
- **Note to Inventor: Please sign name exactly as it appears above and insert the actual date of signing.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE ☒

PAGE 2 OF U.S.A. DECLARATION FORM

of Second Joint inventor:		Hidekazu		Imai			
		Given Name	Middle Initial	Family Name			
**Inventor's Signature:		/ Lidekany		Omai			
**Date of Signature:		10 P 25	1 1999				
J		Month	Day	Year			
Residence: Ebina-shi		Ka	ınagawa	Japan			
	City		te of Province	Country			
Citizenship:		Japan					
Post Office Address:		c/o Fuji Xerox Co., Ltd., 2274, Hongo,					
(Insert Complete mailing address, including country)		Ebina-shi, Kanagawa, Japan					
					_		
Typewritten Full Name of Third Joint inventor	e			_			
of Third Joint inventor	:	Yoshiya		Imoto			
		Given Name	Middle Initial	Family Name			
**Inventor's Signature	::	yoshiya		I moto			
**Date of Signature:		10	25	/ 1999			
	Eliteration	Month	Day	Year			
Residence:	Ebina-shi		nagawa te of Province	Japan			
City		_	Country				
Citizenship:		Japan					
Post Office Address: (Insert Complete mailing		c/o Fuji Xerox Co., Ltd., 2274, Hongo,					
address, including country)		Ebina-shi, Kanagawa, Japan					
Typewritten Full Name of Fourth Joint inventor:		Michio		Kikuchi			
or Fourth John Invento	1.	Given Name	Middle Initial	Family Name			
**Inventor's Signature:		michio	Widdle Illitial	Wihuchi.			
**Date of Signature:		10	/ 22	1 1990			
Date of Digitature.		Month	Day	Year			
Residence:	Ebina-shi	Kanagawa		Japan			
	City		te of Province	Country			
Citizenship:		Japan					
Post Office Address:		c/o Fuji Xerox Co., L	td., 2274, Hongo,				
(Insert Complete mailing address, including country)		Ebina-shi, Kanagawa, Japan					
Typewritten Full Name	2						
of Fifth Joint inventor:				·			
		Given Name	Middle Initial	Family Name			
**Inventor's Signature	:						
**Date of Signature:							
		Month	Day	Year			
Residence:			C D				
C:: 1:	City	Star	te of Province	Country			
Citizenship:							
Post Office Address:							
							

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.

^{**}Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.